PTO/SB/22 (04-07)
Approved for use through 09/30/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.
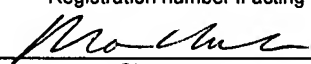
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	Docket Number (Optional) 606952000420	
Application Number	10/812,156	Filed March 29, 2004

For   PREPARATION OF METAL MESOPORPHYRIN COMPOUNDS

Art Unit 1624	Examiner P. Ward

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

		Fee	Small Entity Fee	
☐	One month (37 CFR 1.17(a)(1))	$120	$60	$ _____
☒	Two months (37 CFR 1.17(a)(2))	$450	$225	$ 225.00
☐	Three months (37 CFR 1.17(a)(3))	$1020	$510	$ _____
☐	Four months (37 CFR 1.17(a)(4))	$1590	$795	$ _____
☐	Five months (37 CFR 1.17(a)(5))	$2160	$1080	$ _____

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number   03-1952   ~~I have enclosed a duplicate copy of this sheet~~. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
         Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number _____ 39,933 _____

☐ attorney or agent under 37 CFR 1.34.
         Registration number if acting under 37 CFR 1.34 _____ .

_____(signature)_____ Signature	June 28, 2007 Date
Robert K. Cerpa Typed or printed name	(650) 813-5715 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒   Total of _____ 1 _____ forms are submitted.

1

pa-1177332